



Montana Department of Public Health & Human Services  
Food & Consumer Safety Section (406) 444-2408

**Work Camp Establishment Plan Review**

*Note: This form applies to work camps only, not to campgrounds, trailer courts, or youth camps as defined in 50-52-101, MCA.*

Licensee (Operator) Name \_\_\_\_\_

Establishment Name \_\_\_\_\_

Establishment Location Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Legal Description \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

On-Site Manager (Operator) Name \_\_\_\_\_

Office Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Engineer/Architect/Designer Name (If applicable) \_\_\_\_\_

Business Name \_\_\_\_\_

Business Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Please submit this completed form, scaled layout plans and specifications of your proposal to the Department of Public Health & Human Services (DPHHS), Food & Consumer Safety, PO Box 202951, Helena, MT 59620-2951 **and** to the local sanitarian (i.e. environmental health office).

DPHHS and sanitarian approval of these plans must be obtained prior to construction, alteration, enlargement or occupation of a work camp. Conversion of a work camp, campground or trailer court from one type to another must be approved by DPHHS and local sanitarian, separately licensed based in the type(s), and an additional subdivision review may be required.

Inspection and approval by the local sanitarian must be obtained before a license will be issued. Submit license fee (payable to DPHHS) to local sanitarian once the license is approved. The annual fee is \$40 for 1 to 10 sleeping units, \$60 for 11 to 25 sleeping units, \$120 for 26 or more sleeping units.

If the proposal qualifies as a public water supply or public wastewater system, plans must be submitted to the Department of Environmental Quality (DEQ) and the local sanitarian in accordance with the subdivision requirements in ARM Title 17, Chapter 36, subchapter 3 and public water supply requirements in ARM Title 17, Chapter 38, subchapter 1, as applicable.

DPHHS will make approval or disapproval known to the applicant within 60 days of a complete plan submittal. This deadline may be extended to 120 days or later if an environmental health impact statement is required, as determined by DEQ. Any approval of plans expires in 2 years if construction has not begun.

*Please complete all questions. If a question does not apply to your establishment, then place a "NA" (not applicable) next to the item. Note: most plans are denied because of incomplete information.*

**REASON FOR REVIEW:** Choose one.

- ☐ A. New Construction
- ☐ B. Alteration or Enlargement of Existing Camp
- ☐ C. Reactivation of a Previously Licensed Camp

1. If previously licensed, former name \_\_\_\_\_
2. Previous license number \_\_\_\_\_
3. Last calendar year licensed \_\_\_\_\_

**PROPOSAL FOR THE WORK CAMP:**

1. RV or manufactured home (trailer) sites \_\_\_\_\_
2. Sleeping units or other shelters with beds (which are not RVs or trailer homes) \_\_\_\_\_
3. Total maximum number of persons (including on-site management and/or other staff) \_\_\_\_\_

**GENERAL PLAN REVIEW REQUIREMENTS**

*With this application, please submit the following:*

- ☐ 1. Scaled plans showing the number, size and location of all trailer/RV spaces, sleeping units and other shelters, service buildings, and other structures.
- ☐ 2. Detail of each trailer/RV/shelter space, showing where the water and sewer risers are in relation to one another.
- ☐ 3. Detail of location of water and sewer riser on typical trailer/RV/shelter space, if not obvious on main plan.
- ☐ 4. Location and detail of each watering station (used by multiple campers).
- ☐ 5. Location and detail of each wastewater sanitary station (used by multiple campers).
- ☐ 6. Location of each solid waste storage containers.
- ☐ 7. Location, detail and finish schedule of any service building, cooking or cleaning shelter, or other structure used by the workers.

*The following will be more thoroughly reviewed by DEQ and/or local jurisdictions:*

- Information relating to the water supply and distribution system.
- Cross section of stop-and-waste valve and drain system.
- Water service lateral pipe size, material and location.
- Cross section of water riser indicating pipe size and material is shown.
- Sewer service lateral pipe size, material, gradient and location.
- Cross section of sewer riser indicating pipe size and material.
- Detail of water and sewer line crossing with vertical and horizontal separations.
- Evidence that the existing utilities meet or exceed current standards.
- Information relating to the wastewater collection, treatment and disposal system, surface drainage as required by ARM 17.36.104.

## WATER SUPPLY

Choose one of the following five options which best describes the **potable water supply source**.

- ☐ A. The establishment will be connecting to an existing public water supply, PWSID #\_\_\_\_\_. Connection to a public water supply is required if an available supply has adequate pressure and volume, and the owner agrees to provide service. Connection plans must be reviewed and approved by DEQ.
- ☐ B. A public water supply will be developed and used. "Public water supply system" means a water supply that has at least 15 service connections or that regularly serves at least 25 persons daily for any 60 or more days in a calendar year. Plans must be reviewed and approved by DEQ.
- ☐ C. The establishment will use a private water supply which meets DEQ #84-11.
- ☐ D. The camp is not able to provide an adequate water supply system due to the transient nature of the work camp. A temporary water supply will be constructed and operated in accordance with the following:
  - ☐ DEQ Circular #11 for springs
  - ☐ DEQ Circular #17 for cisterns
- ☐ E. The system does not meet DEQ #84-11, Circular #11, or Circular #17, but is designed by an engineer registered in Montana, offering sanitary protection equivalent to DEQ #84-11, Circular #11 and/or Circular #17. PE name \_\_\_\_\_

Choose one of the following three options which best describe **access to water**.

- ☐ A. An individual water hydrant or connection riser will be at each trailer, RV, or sleeping unit structure.
- ☐ B. A common water station will be within 300 feet of each trailer, RV or sleeping unit structure, and will be separated from any wastewater station to ensure water hose is not used to flush a wastewater holding tank.
- ☐ C. Some sites will have an individual hydrant or riser, some will use a common water station. *(This should be clearly marked on the layout plans)*

Answer all of the following for **potable water protection**. Must meet all of the following conditions.

- ☐ 1. Water risers and hydrants will be protected by a post or other permanent barrier. Describe: \_\_\_\_\_
- ☐ 2. Water risers will have a shut-off valve at each outlet.
- ☐ 3. Valves are turned off and outlets capped when not used.
- ☐ 4. Water connections to each site or living unit will be protected from backflow/back siphonage. Describe: \_\_\_\_\_
- ☐ 5. Risers are at least ¾ inch in diameter and extend at least 4 inches above ground.
- ☐ 6. Risers, lines and valves are protected from freezing. *(describe)* \_\_\_\_\_

## WASTEWATER AND SEWAGE DISPOSAL SYSTEM

- Note: All wastewater, including liquid waste from sinks, showers and baths must be disposed in an approved wastewater system.

Choose one of the following to describe the **toilet facilities**:

- ☐ A. Each living unit, RV, trailer or other structure has individual toilet facilities.
- ☐ B. Central toilet facilities are located with 300 feet of all sleeping quarters lacking individual toilets, and are provided at a ratio of at least one toilet for every 10 persons.

Choose one of the following four options which best describes the **wastewater disposal system**.

- ☐ A. The establishment will be connecting to an existing public wastewater system, DEQ #\_\_\_\_\_. Connection to a public wastewater system is required if an available system has adequate capacity, and the owner agrees to provide service. Connection plans must be reviewed and approved by DEQ.
- ☐ B. A public wastewater system will be developed and used. System name: \_\_\_\_\_  
"Public wastewater system" means a sewage system that has at least 15 service connections or that regularly serves at least 25 persons daily for any 60 or more days in a calendar year. Plans must be reviewed and approved by DEQ.
- ☐ C. A private sewage system will be used. It is adequate, safe, and meets local regulation (i.e. permitted) under 50-2-116, MCA.
- ☐ D. An alternative system designed by an engineer registered in Montana and approved by the department and local health authority will be used. (describe) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### SEWAGE SYSTEM CONNECTION

For **individual sewer riser connections** at each site: Must meet all of the following conditions.

- ☐ 1. 4 inch diameter riser, in vertical position.
- ☐ 2. Sewer riser separated from drinking water riser by at least 6 feet at finished grade.
- ☐ 3. Surface drainage diverted away from riser.
- ☐ 4. Air-tight, tamper-resistant cap in place when not occupied.
- ☐ 5. Connection to living unit has a nominal inside diameter of at least 3 inches.
- ☐ 6. Connection is sloped at least ¼ inch per foot.
- ☐ 7. One line connection, without any branch fitting
- ☐ 8. Joints are water-tight
- ☐ 9. Connection material is durable, corrosion resistant and non-absorbent.
- ☐ 10. Connection material has smooth inner surface, except flex hose may be used for temporary connection for less than 15 days.

For common area **sanitary stations**: Choose one of the three options.

- ☐ A. At least one for every 100 independent RV sites without an individual sewer riser.
- ☐ B. A posted sign gives the location of a sanitary station available to the campers 24/7 within a reasonable distance (within 15 miles is recommended based on campground standards).  
Describe: \_\_\_\_\_

- ☐ C. A deviation from the above two options is requested based on considerations beyond the control of the work camp operator [Reference ARM 37.111.616 (8)(b)]. Describe:

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*Common area **sanitary stations** must meet the following:*

- ☐ 1. 4 inch minimum diameter sewer riser.
- ☐ 2. Concrete apron at least 4 square feet at inlet end, sloped to the drain.
- ☐ 3. Self-closing hinged cover over the central drain.
- ☐ 4. Wash-down water outlet with anti-back siphoning device.
- ☐ 5. Sign states the wash-down water is unsafe for drinking.

**SOLID WASTE** *Must meet all of the following conditions.*

- ☐ 1. Management will provide solid waste storage, collection and disposal.
- ☐ 2. Containers are rodent-proof, with secured lids that are fly-tight and water-tight.
- ☐ 3. Containers are within 150 feet of every site.
- ☐ 4. Garbage storage is adequate and prevents any type of hazard.
- ☐ 5. Garbage is sent to a licensed solid waste facility at least weekly.

➤ Name of facility: \_\_\_\_\_

**SHELTERS AND OTHER STRUCTURES FOR WORKER USE** *Must meet all of the following conditions.*

- ☐ 1. Rooms and hallways have at least 10 footcandles of light.
- ☐ 2. Floors and walls subject to significant moisture are smooth and non-absorbent (i.e. bathrooms, laundry rooms, kitchen areas).
- ☐ 3. Floors, walls, ceilings, furnishings, and equipment kept in good repair, free of hazards, and clean.
- ☐ 4. Handwashing and bathing water may not exceed 120°F
- ☐ 5. Bathing facilities are provided with anti-slip surfaces.
- ☐ 6. Cleaning supplies are provided to residents to meet housekeeping needs.
- ☐ 7. Sleeping units are thoroughly cleaned and repaired as needed before a new person moves in.
- ☐ 8. If laundry service is provided, it must meet ARM 37.111.121.
- ☐ 9. If housekeeping service is provided by management, it must meet ARM 37.111.122.

**FOOD SERVICE** *Choose at least one of the three options, or all that are applicable, and answer the details for each.*

- ☐ A. Individual, family use, or common kitchen facilities are available for the workers to use, and they have:

- ☐ 1. Adequate facilities to wash, rinse, and dry equipment and utensils.
- ☐ 2. Refrigeration capable of maintaining foods at or below 45°F.
- ☐ 3. Cooking facilities.
- ☐ 4. Adequate space to prepare and store food.
  
- ☐ B. The work camp will provide food service for the work camp residents only (not the general public) and it meets the following:
  - ☐ 1. Food is obtained from approved sources that comply with all federal and state law, including labeling.
  - ☐ 2. Canned or hermetically sealed containers of food are prepared in a licensed food manufacturing establishment.
  - ☐ 3. Food is free of spoilage, filth, or other contamination.
  - ☐ 4. Food is protected from potential contamination at all times while being stored, prepared, displayed, served, or transported, including but not limited to dust, insects, rodents, unclean equipment and utensils, unnecessary handling, coughs and sneezed, flooding, drainage, and overhead condensation.
  - ☐ 5. Food is thoroughly washed and/or cooked as necessary to destroy disease-causing microorganisms.
  - ☐ 6. Potentially hazardous food is held at 45°F or below or 140°F or above.
  - ☐ 7. Thawing is done at 45°F or below, during cooking process, or equivalent method approved by the local sanitarian.
  - ☐ 8. Food transported from a kitchen to any area not immediate connected is protected from contamination with adequate covers or packaging.
  - ☐ 9. Food workers are not infected with or a carrier of a communicable disease that could be transmitted by foods.
  - ☐ 10. Food workers maintain a high degree of personal cleanliness and practice good hygiene.
  - ☐ 11. Food workers are free of any infected wound, boil, diarrhea, gastro-intestinal illness or acute respiratory infection.
  - ☐ 12. Food equipment and utensils meets the following:
    - ☐ 1. Designed and safe for food use, non-toxic and resistant to corrosion.
    - ☐ 2. Is thoroughly cleaned and in good repair after each use.
    - ☐ 3. Is smooth, durable and easily cleanable or single-use.
    - ☐ 4. Is protected from contamination in handling and storage.
  - ☐ 13. Operation has adequate equipment and utensil washing and sanitizing facilities.
  - ☐ 14. Floors, walls, ceilings, of food preparation and storage areas are smooth, non-absorbent, easily cleanable, kept clean and in good repair.

- ☐ C. The food service meets the licensing requirements of a public retail food service establishment, when applicable. [Ref: 50-50-102, MCA] License number \_\_\_\_\_  
Last inspection date\_\_\_\_\_

**INSECT, RODENT AND WEED CONTROL** *Please check each item to verify you understand these requirements of licensing, or the applicant has given this information to the licensee/manager.*

- ☐ 1. Buildings and structures are free of insect and rodent infestations.
- ☐ 2. Insecticides, rodenticides or herbicides are used according to manufacturer's instructions.
- ☐ 3. Brush, weeds, grass and other plant growth is controlled within central camp areas to eliminate harborage of insects effecting public health.
- ☐ 4. Noxious plants such as ragweed, poison ivy, poison oak, and poison sumac are not allowed to grow on camp property where people go.

**ABANDONMENT OF THE WORK CAMP**

- ☐ When the operation of a work camp is permanently stopped, all septic tanks, privy vaults and cisterns must be emptied then filled with solid materials, or removed from the camp.

## LICENSE REQUIREMENT AND DISPLAY

- ◆ Notice: Once you receive your license, it must be displayed in a location approved by local health authority or department. The license is not transferable. This means if you sell your business to another person, or the legal licensee changes from the one listed on the license to another legally responsible entity, then he/she must apply for a new license. If you move to a new location, you must apply for a new license. If you add any type of sites, you must contact the health authority for a review and approval of your changes.
- ◆ Approval of these plans and specifications by the health authority does not indicate compliance with any other code, law or regulation that may be required.
- ◆ Obtaining a license from the health authority does not relieve the applicant from satisfying applicable requirements from other federal, state, or local agencies (such as zoning, building, fire and life safety inspections, and other business licenses).
- ◆ I hereby certify that the above information is correct. I fully understand that any deviation from the above without prior permission from the health authority may nullify any approval from the local health authority and/or the department.

❖ *This application must be signed and dated by at least one of the following:*

➤ Licensee Signature (Owner or Manager)

Name \_\_\_\_\_ Date \_\_\_\_\_

➤ Engineer/Architect/Designer

Name \_\_\_\_\_ Date \_\_\_\_\_

➤ Other Applicant Authorized by Licensee

Name \_\_\_\_\_ Date \_\_\_\_\_